PTO/58/01 (09-04)
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DECLARATION FOR UTILITY OR			Attorney Docket Number	3561			
4	SIGN		First Named Invent	Bengt Goran Eriksson		on	
PATENT APPLICATION			COMPLETE IF KNOWN				
(37 C	FR 1.63)		Application Number	10/5	B3,401		
Declaration Submitted OR With Initial Filling	✓ Declar Submi	ation Itled after Initial	Filing Date	6/16/	/2006	·	
		(surcharge FR 1.16 (e)) red)	Art Unit				
	requin		Examiner Name				
I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
WATER TREATMENT PROCESS							
(Title of the Invention)							
the specification of which							
is attached hereto							
OR							
was filed on (MM/DD/YYYY) 06/1		06/17/2006	as United States Application Number or PCT International				
Application Number 10/583,401		and was amended	ras amended on (MM/DD/YYYY) 06/17/2006 (if applicable).				
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing		ority		opy Attached?	
		(MM/DD/YY)		leimed	YES	Harched berete	
	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.						

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450,

If you need assistance completing the form, call 1-BOO-PTO-9199 and select option 2.

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number DECLARATION — Utility or Design Patent Application

Direct all The address OR Correspondence 21834 associated with address below correspondence to: **Customer Number:** Name BECK & TYSVER, P.L.L.C. Address 2900 Thomas Avenue South, Suite 100 City State ZIP Minneapolis MN 55416 Country Telephone Fax 612-915-9633 612-915-9637 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Sumame Bongt Goran Eriksson Inventor's Signature Date 3. Luksson 15/07/07 Residence: City Country Citizenship Strathpine Queensland Australia Australian Mailing Address 16 Navua Street City State Zip Country Strathpine Queensland 4500 Australia NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name (first and middle (if any) Family Name or Sumame Stephen Ross Onpin Inventor's Signature Residence: City State Country Citizenship Kallangur Queensland Australian Austrafia Mailing Address 16 Carnet Avenue City State Zip Country Kallangur Queensland 4502 Australia Additional inventors or a legal representative are being named on the _____supplemental sheet(s) PTO/SB/DZA or 02LR attached hereto.

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number ADDITIONAL INVENTOR(S) DECLARATION Supplemental Sheet Page 1 Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle (if any)) Family Name or Surname Timothy Kevin Graham Inventor's 11/07/02 1107-107 Signature Date ALEXANDRA Bolmont Queeneland Australian Residence: City dnState Country Citizenship 31/391 Belmon Road 11/07/07 Mailing Address - ALEXANDRA HILLS Queensland F6/ FU/11 _ 2 State 2ic Country Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle (if any)) Family Name or Surname Inventor's Signature Date Residence: City State Country Citizenship Mailing Address City State Country Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle (if any)) Family Name or Surname Inventor's Signature 5 4 1 Date Residence: City State Country Citizenship Mailing Address

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